



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5056

<b>SERIAL NUMBER</b> 09/900,559	<b>FILING OR 371(c) DATE</b> 07/05/2001 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> 010299
------------------------------------	---------------------------------------------------------------	---------------------	-------------------------------	------------------------------------------

## APPLICANTS

Robert S. Daley, Del Mar, CA;  
 Dan Vassilovski, Del Mar, CA;

\*\* CONTINUING DATA <sup>No</sup> \*\*\*\*\*

\*\* FOREIGN APPLICATIONS <sup>No</sup> \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

08/22/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials <u>DE</u>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> <u>68</u> <u>49</u>	<b>INDEPENDENT CLAIMS</b> <u>8</u> <u>4</u>
------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------	--------------------------------	------------------------------------------------	----------------------------------------------------

## ADDRESS

23696

## TITLE

System and method for voice over IP

<b>FILING FEE RECEIVED</b> 1814	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------